

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

97 OCT 29 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000032716 (9)

1. Corporation Name

VERITAS INTERNATIONAL CORPORATION

REINSTATEMENT

Principal Place of Business

ONE WORLD TRADE PLAZA
80 S.W. 8TH STREET., 1800 2802
MIAMI FL 33130

Mailing Address

ONE WORLD TRADE PLAZA
80 S.W. 8TH STREET., 1800 2802
MIAMI FL 33130



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/20/1995		3a. Date of Last Report 12/02/1996	
4. FEI Number 65-0584527		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business 21 Brickell Bay View Tower Suite, Apt. #, etc. 22 80 S.W. 8th St. Suite 2802 City & State 23 Miami, FL Zip 24 33130 Country 25 U.S.		2a. Mailing Address 26 Brickell Bay View Tower Suite, Apt. #, etc. 27 80 S.W. 8th St. Suite 2802 City & State 28 Miami, FL Zip 29 33130 Country 30 U.S.	
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9. Name and Address of Current Registered Agent

NEJI, MONDHER B
780 NE 60 STREET
SUITE 300
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name NEJI, MONDHER
82 Street Address (P.O. Box Number is Not Acceptable)
80 SW 8th Street SUITE # 2802
83
84 City Miami FL 85 Zip Code 33130

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 10/27/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD NEJI, MONDHER B 780 NE 60 STREET, SUITE 300 MIAMI FL 33138 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PSTD NEJI, MONDHER B 80 SW 8th St. SUITE 2802 MIAMI FL 33130 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	8000002335578--9 10/31/97-01/08-015 ****750.00 ****750.00 REINSTATEMENT 1997 <i>[Signature]</i> 10/30/97 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* DATE 10/14/97 (305) 358-4888

CR2E034 (4/97)